

PART B - FEE(S) TRANSMITTAL

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09/18/2008

David M. Carter, Esq.
Carter, DeLuca, Farrell & Schmidt, LLP
Suite 225
445 Broad Hollow Road
Melville, NY 11747

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being electronically transmitted to the USPTO (571) 273-2885, on the date indicated below.

Maria Goldman	(Depositor's name)
<i>Maria Goldman</i>	(Signature)
December 12, 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/648,176	08/25/2003	Vladimir Gurevich	1400-42 (1575)	4436

TITLE OF INVENTION: AXIAL CHROMATIC ABERRATION AUTO-FOCUSING SYSTEM AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PRIV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	12/18/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
HAUPT, KRISTY A	2876	235-462240

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

2. For printing on the patent front page, list

1. Carter, DeLuca, Farrell & Schmidt, LLP

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/112) attached.

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

2. _____

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02, or more recent) attached. Use of a Customer Name is required.

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Symbol Technologies, Inc.

Holtville, NY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

4b. Payment of Fee(s): (Please first reappay any previously paid issue fee shown above)

☒ Issue fee

☐ A check is enclosed.

☐ Publication Fee (No small entity discount permitted)

☐ Payment by credit card. Form PTO-2038 is attached.

☐ Advance Order - # of Copies _____

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patents and Trademark Office.

Authorized Signature /George Likourezos/

Date December 12, 2008

Typed or printed name George Likourezos

Registration No. 40,067

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